PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee patients. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS	(Note: Use Block 1	for any change of address)

000466

7590

12/08/2004

YOUNG & THOMPSON 745 SOUTH 23RD STREET 2ND FLOOR ARLINGTON, VA 22202



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name (Signature (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/529,379	05/10/2000	XANDER VAN DER HEIJDEN	BO 41504	7020

TITLE OF INVENTION: METHOD AND APPARATUS FOR STRUCTURED COMMUNICATION

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	THE YES	- \$1370 -\$700		\$0	-\$1370 -∯700	
	,		700		· · · · · · · · · · · · · · · · · · ·	
EXAM	IINER	ART UNIT		CLASS-SUBCLASS		
LAFORGIA, O	CHRISTIAN A	2131		709-230000		
CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	e address or indication of "Fedence address (or Change of 22) attached. tion (or "Fee Address" Indication more recent) attached. Use DESIDENCE DATA TO B	Correspondence () ution form 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1) the nare agents (2) the nare egistered? registere isted, no resisted.	ting on the patent front page, limes of up to 3 registered pater DR, alternatively, ne of a single firm (having as a attorney or agent) and the nam d patent attorneys or agents. If lame will be printed.	t attorneys 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	& THOMPSON
PLEASE NOTE: Unless	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee data of this form is NOT a s	will appositute	ear on the patent. If a fill a second		ocument bes been filed for
X-Way Right	assignee category or catego			noven, the Nether 01 50: atent): 🗖 Individual 💆 Co	lands 2501 opporation or other private gro	up entity
4a. The following fee(s) are	enclosed:		yment of			
X Issue Fee		<u>\</u>	A check i	n the amount of the fee(s) is en	closed.	6.00 OP
Dublication Fee (No s	mall entity discount permitte			by credit card. Form PTO-2038		*
Advance Order - # of	Copies 2	Dej	The Dire	ctor is hereby authorized by clount Number 25-0120	narge the required fee(s), or o	credit any overpayment, to
5. Change in Entity Status	(from status indicated above)		(if necess	ary)	
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	b. Applic	ant is no longer claiming SMA	LL ENTITY status. See 37 CF	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) v ords of the United States Pate	e Fee and Publication will not be accepted fro ent and Trademark Offi	Fee (if an m anyone ice,	y) or to re-apply any previously other than the applicant; a regi	y paid issue fee to the applicat stered attorney or agent; or th	tion identified above. e assignee or other party in
Authorized Signature	Benoît Cas	stef		DateM	arch 7, 2005	
Typed or printed name	Benoit CASTE	<u></u>		Registration	N_0 , #35,041	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name

Registration No.